

# 2003 Boards and Commissions Report

## Hanford Area Economic Investment Fund Committee

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

CTED

1991

11

12+

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

Approve requests for Hanford area revolving loan funds, Hanford area infrastructure projects, or other Hanford area economic development and diversification projects.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

1) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

201,046

Hanford Area Economic Investment Account non-appropriated

2003-2005 Biennium Estimate

201,046

Hanford Area Economic Investment Account non-appropriated

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) No direct staff associated with board.

b) Does not appear to be another appropriate agency to assign this to

c) This board approves loan requests for the fund. It would eliminate the ability to approve loan requests

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 43.31.425

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

### 16. Required Representation:

The committee shall have a balanced membership representing one member each from the elected leadership of Benton county, Franklin county, the city of Richland, the city of Kennewick, the city of Pasco, a Hanford area port district, the labor community, and four members from the Hanford area business and financial community

17. Federal or other mandates:

none

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

N/A

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Jim Keogh, Managing Director

7/22/03

128 10<sup>th</sup> Avenue SW, Olympia, WA 98504-2525

725-4041

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Health and Welfare Advisory Board

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Office of Financial Management

1992

6

8

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

To assist the State Risk Manager in adopting rules governing the operation and management of both individual and joint self-insured health and welfare benefits programs.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

2) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

1600

Risk Management Admin. Account -- N

2003-2005 Biennium Estimate

1600

Risk Management Admin. Account -- N

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Loss of formal local government input on program administration

b) same as a)

c) same as a)

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 48.62.051

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☒ three ☐ four

### 16. Required Representation:

One city management representative, one county management representative, two management representatives from local government self-insured health and welfare programs, and two representatives of statewide employee organizations representing local government employees.

17. Federal or other mandates:

none

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

none

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

John Nicholson, Risk Management Coordinator

9/8/2003

PO Box 41027, Olympia, WA 98504

360-902-7311

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Health Care Assistants

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Washington State Department of Health

1984

0

0

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

The members shall provide advice on matters specifically identified and requested by the secretary. Advises and recommends regarding promulgating rules; provides expert advice on disciplinary matters; business plans to support fiscal budget and necessary fee levels.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

3) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

0

1) Health Professions Account

2) A

2003-2005 Biennium Estimate

0

1) Health Professions Account

2) A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) The impact of losing the ability to appoint an ad hoc committee to direct technical input and cooperative working relationships with staff would be increased staff time at the expense of other priority areas, need to pay for technical expertise not available on staff, increased time to reach decisions, more time required of stakeholders for their participation, and the possibility that rural and less represented areas may lose their voice in agency decisions.

b) Professional knowledge and expertise would be lost. Most likely agency is the Department of Licensing.

c) Agency would need to find technical advice elsewhere.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 18.135 / WAC 246-826

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Secretary, Department of Health

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☒ two ☐ three ☐ four

16. Required Representation:

The secretary or the secretary's designee may appoint members of the health care assistant profession and other health care practitioners, as defined in RCW 18.135.020(3), to serve in an ad hoc capacity to assist in carrying out the provisions of the statute. The members shall provide advice on matters specifically identified and requested by the secretary.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Tracy A. Hansen

07-21-2003

310 Israel Rd SE, Tumwater WA 98512

(360) 236-4940

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Washington Health Care Facilities Authority

1. Board/Commission Name (B/C) Same	2. Name B/C reported under in 2001 or Unchanged X
3. Agency to which B/C reports	4. Year B/C was established 1974
	5. Number of members 5
	6. Number of meetings last biennium 24

### 7. Summary: Primary Responsibilities:

The Authority was created to assist non-profit health care providers in Washington reduce their capital facility costs of construction, remodeling and equipment purchases. Non-profit health care providers include hospitals, community clinics, community mental health providers, alcohol and chemical dependency treatment centers, kidney dialysis centers as well as other health care organizations providing some type of medical care. The Authority achieves its statutory mission by issuing low-cost tax-exempt interest rate bonds and loaning the proceeds to non-profit health care providers. Without Authority assistance, non-profit health care providers could only borrow at more expensive taxable interest rates. These rates are typically two percentage points higher than tax-exempt interest rates. In calendar year 2002, the Authority was able to reduce health care provider's interest costs by over \$50 million. Since inception, the Authority has issued over \$5.3 billion in loans in over 210 separate transactions, of which over \$2.7 billion is currently outstanding.

The Authority was created as an independent state agency, with the enabling statute carefully drafted and tested in the State Supreme Court, so that the operations of the Authority and the bonds issued by the Authority would not become obligations of the state of Washington. The state is also not legally obligated for the principal and interest on the bonds issued by the Authority. A key part of the enabling legislation included the provision that the Authority may not receive any funds from the state. As such, the Authority is a fee-for-service organization and bills its health care borrowers for services.

8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds
		4) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated
2001-2003 Biennium Actual	\$1.4 million	Washington Health Care Facilities Operating Trust Fund Non-appropriated
2003-2005 Biennium Estimate	\$1.9 million	Washington Health Care Facilities Operating Trust Fund Non-appropriated

### 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Some group will still have to process the loan requests and coordinate agency services with outside bond counsel.	b) If agency functions were transferred to an budgeted/appropriated state agency, the state would run the risk, under the Supreme Court decision approving the agency, of possibly becoming liable for the Authority outstanding debt of \$2.7 billion.	c) Without Authority assistance, health care providers would need to charge an additional \$50 million in fees each year to cover the increased debt service costs.
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### 10. Legal authorization: State Constitution Article, RCW, WAC or EO Chapter 70.37 RCW

12. **Appointing Authority:** Members are set by statute as: the Governor, Lt. Governor, Insurance Commissioner, Secretary of the Department of Health, and one public member appointed by the Governor and confirmed by the Senate.

### 11. Legal Authorization is:

☒ Specific ☐ General

### 13. Is Senate confirmation required?

☒ Yes ☐ No

### 14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

### 15. Board/Commission member compensation class

☐ one ☐ two ☒ three ☐ four

### 16. Required Representation:

See question 12 above. The public member should have an interest in and knowledge of health care delivery in the state.

### 17. Federal or other mandates:

The Authority must comply with very complex federal tax law and federal securities laws applicable to the issuance of municipal bonds.

### 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

### 19. Certification:

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

John H. Van Gorkom, Executive Director	7/24/2003	410 11 <sup>th</sup> Ave. SE, P.O. Box 40935 Olympia, WA. 98504-0935	360.753.6185
Name and Title	Date	Address	Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Health Professional Loan Repayment and Scholarship Advisory Committee

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Higher Education Coordinating Board and Department of Health

1992

20

6

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

The Advisory Committee is actively involved in recommending program policy, developing selection criteria for program participants, defining health professional shortage areas and loan repayment sites; determining program funding levels, and coordinating statewide recruitment efforts.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

5) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$ 3,158

Health Professional Loan Repayment & Scholarship Program Fund

2003-2005 Biennium Estimate

\$ 3,200

G.F. State/A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) same as "c"

b) same as "c"

c) Lack of direct input from community and provider groups to equalize access to health care providers for the citizens of Washington State.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 28B.115.050

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Program Manager

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☒ one ☐ two ☐ three ☐ four

### 16. Required Representation:

Appropriate representation from departments of health, education, and social services as well as appropriate representatives of health care facilities, provider groups, consumers, and appropriate public and private agencies and organizations.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Joann Wismann, Associate Director for Administrative Services

7/25/03

PO Box 43430  
Olympia, WA 98504-3430

(360) 753-7831

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Health Services Advisory Board

Medical Health Planning Group/Mental Health Planning Board

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☐

Department of Corrections

2003

20

12

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

Combining the Medical Health Planning Group and the Mental Health Planning Board supports the Department of Corrections current direction toward a more centralized health care approach integrating medical, mental health, dental and public health issues. Statewide multi-disciplinary planning would be restricted if there is no consolidated group.

\*Note: Health Services Advisory Board, established in 2003 is the combined Medical Health Planning Group and the Mental Health Planning Board, created in 1984. Each had 20 members and hosted 24 meetings combined.

### 8. Estimated Operating Costs (Boards/Commissions Only)

#### Total Costs

#### Sources of Funds

6) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

-0-

2003-2005 Biennium Estimate

-0-

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) No similar resources available

b) This group addresses only Department of Corrections' issues.

c) This group is essential in integrating medical, mental, dental and public health issues at DOC

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 72.09.050 (Secretary's Authority)

11. Legal Authorization is:

☐ Specific ☒ General

12. Appointing Authority: Secretary, Department of Corrections

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☒ one ☐ two ☐ three ☐ four

### 16. Required Representation:

To vary according to needs as preceived by the Secretary.

17. Federal or other mandates:

None.

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None.

19. Certification:

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Patria N. Robinson-Martin  
Chief of Staff

07/23/2003

Post Office Box 41101  
Olympia, Washington 98504-1101

360-753-0896

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Board of Hearing and Speech

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Washington State Department of Health

1996

10

10

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

Establish minimum standards and procedures for hearing instrument fitter/dispensers, audiologists and speech language pathologists. Develop guidelines for apprenticeship programs and interim permit holders. Adopt rules. Develop, approve and administer licensing and certification examinations. Require licensees and certificate holders to make restitution to individuals harmed through violation of Chapter 18.35 RCW or the UDA. Conduct disciplinary hearings and impose penalties and sanctions for violations of Chapter 18.35 RCW, Chapter 18.30 RCW or Chapter 246-828 WAC.

### 8. Estimated Operating Costs (Boards/Commissions Only)

#### Total Costs

#### Sources of Funds

7) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$236,967

1) Health Professions Account

2) A

2003-2005 Biennium Estimate

\$280,000

1) Health Professions Account

2) A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) The impact of losing board direct technical input and cooperative working relationships with staff would be increased staff time at the expense of other priority areas, need to pay for technical expertise not available on staff, increased time to reach decisions, more time required of stakeholders for their participation, and the possibility that rural and less represented areas may lose their voice in agency decisions.

b) Professional knowledge and expertise would be lost. Most likely agency is the Department of Licensing.

c) The responsibilities are necessary to protect the public from incompetent or unqualified practitioners.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

Chapter 18.35 RCW

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☒ two ☐ three ☐ four

16. Required Representation:

Two licensed hearing instrument fitter/dispensers, two certified audiologists, two certified speech-language pathologists, three members of the public and one non-voting member licensed as a medical or osteopathic physician.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Diane Young, Deputy Executive Director

7/11/03

PO Box 47869, Olympia, WA 98504-7869

360-236-4950

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

Heritage Corridor Grant Ranking Team

Heritage Corridor Advisory Committee

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☐

WSDOT

1995

8

2

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

7. Summary: Primary Responsibilities:

Area experts to assist with scoring grant applications for the Scenic Byway Program.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

8) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$600

Fund 108 - Motor Vehicle Account  
"A"

2003-2005 Biennium Estimate

0

Fund 108 - Motor Vehicle Account  
"A"

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Loss of Public Involvement in the Scenic Byway Program.

b) Due to federal funds involved in the capital program, no other agency could assume responsibility.

c) The ability to conduct a competitive grant process would be harmed.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 47.39

11. Legal Authorization is:

☐ Specific ☒ General

12. Appointing Authority: Director, Highways & Local Programs

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☒ one ☐ two ☐ three ☐ four

16. Required Representation:

none

17. Federal or other mandates:

none

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

none

19. Certification:

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Paula Connelley, Byway & Interpretive Specialist

7-22-03

PO Box 47390, Olympia, WA 98504

360-705-7895

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Higher Education Coordinating Board (HECB)

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Same

1985

10

26

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

Provides planning, coordination, monitoring and policy analysis for higher education in the state; administers all of the state's student financial aid programs.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

9) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$47,480

G.F. State/A

2003-2005 Biennium Estimate

\$48,000

G.F. State/A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Will lose voice and volunteer citizen representation.

b) Responsibilities and workload too big to be absorbed by another agency; service to students will suffer.

c) State will lose capability to coordinate, monitor, and develop higher ed policies from a broad, objective perspective.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 28B.80.300

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☒ Yes ☐ No

14. Does Board/Commission have subpoena powers?

☒ Yes ☐ No

15. Board/Commission member compensation class

☐ one ☐ two ☒ three ☐ four

16. Required Representation:

Geographical

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Joann Wismann, Associate Director for Administrative Services

7/25/03

PO Box 43430  
Olympia, WA 98504-3430

(360) 753-7831

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Higher Education Facilities Authority

unchanged

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

same

1983

7

3

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

The Authority helps reduce the cost and increase the quality and availability of higher education facilities in the state through issuing tax-exempt revenue bonds. The Authority provides eligible nonprofit higher educational institutions access to capital markets. This is done by issuing tax-exempt revenue bonds and then lending the colleges and universities the proceeds for the construction and renovation of new or existing facilities, the purchase of equipment or the refinancing or refunding of prior debt.

### 8. Estimated Operating Costs (Boards/Commissions Only)

#### Total Costs

#### Sources of Funds

10) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

314,681

fee/N

2003-2005 Biennium Estimate

120,922

Fee/N

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) No savings anticipated: current costs compared to other states' authorities are already some of the lowest in the country.

b) Risk of liability to state general fund of authority bond debt increases.

c) cost of financing higher education in this state would increase.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 28B.07, WAC Title 253

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Statute 28B.07 for Governor, Lt. Governor, and Executive Director of Higher Education Coordinating Board. Governor appoints public members.

13. Is Senate confirmation required?

☒ Yes ☐ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☒ three ☐ four

### 16. Required Representation:

Besides the governor (or designee--only the Governor may designate someone), Lt. Governor, and the Executive Director of the Higher Education Coordinating Board, there are four public members, one of whom be a college or university president.

### 17. Federal or other mandates:

Authority must exist for State to have power to issue federal tax-exempt bonds for non-profit higher education institutions.

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None.

### 19. Certification:

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Shannon Wallace, secretary  
Name and Title

9/02/03  
Date

1000 2<sup>nd</sup> Avenue, Suite #2700 Seattle, WA 98104  
Address

206-254-5363  
Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Board of Trustees, Community College District # 9 - Highline Community College

1. Board/Commission Name (B/C) Same	2. Name B/C reported under in 2001 or Unchanged <input checked="" type="checkbox"/> 1961 5 22 regularly scheduled meetings
3. Agency to which B/C reports	4. Year B/C was established 5. Number of members 6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

1. Operate the community colleges in the district
2. Create comprehensive programs of community college education
3. Employ college staff
4. Establish facilities
5. Establish fees and charges
6. Prescribe courses of study
7. Grant degrees and diplomas
8. Enforce rules and regulations of the State Board for Community and Technical Colleges and promulgate rules not inconsistent with the law or rules and regulations of the State Board for the administration of the district.

8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 11) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated
2001-2003 Biennium Actual	\$31,520	66% = \$20,803 -- General Fund -- State -- A 33% = \$10,717 -- Local Funds -- N
2003-2005 Biennium Estimate	\$61,520	66% = \$ 40,603 -- General Fund -- State -- A 33% = \$20,917 -- Local Funds -- N

### 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

- |   |   |  |
|---|---|--|
| a) Citizen representation in the governance of public colleges would be eliminated. | b) Only likely agency is State Board for Community and Technical Colleges--would reduce local input and community representation on policy direction. | c) Community input and policy-making for District would cease. |
|---|---|--|

### 10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 28.B.50

### 11. Legal Authorization is:

☒ Specific ☐ General

### 12. Appointing Authority: Governor

### 13. Is Senate confirmation required?

☒ Yes ☐ No

### 14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

### 15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

### 16. Required Representation: RCW 28B.50.100 (The member shall be a resident and qualified elector of the College District.) Geographic diversity and representation from labor, business, women, ethnic minorities, and commitment to education are important elements used by the Governor in the selection process.

### 17. Federal or other mandates:

None

### 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

### 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Laura E. Saunders	7/10/03	Highline Community College, P.O. Box 98000,	(206)878-3710
Vice President for Administration		Des Moines, WA 98198-9800	

Name and Title	Date	Address	Phone
----------------	------	---------	-------

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

Hispanic Affairs, Washington State Commission on

Hispanic Affairs Commission

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☐

Same

1971

11

6

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

## 7. Summary: Primary Responsibilities:

To examine and define issues pertaining to the rights and needs of Hispanics, and make recommendations to the Governor, the Legislature, and state and local agencies for changes in programs, laws, and practices that affect the Latino community of the state of Washington.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

12) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

444,000

General Fund – State -- A

2003-2005 Biennium Estimate

413,000

General Fund – State -- A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Commission structure allows for statewide coverage of Latino community. Olympia-based staff is insufficient to appropriately identify issues of concern to Latino community

b) Same as a. Unknown as to which agency would most likely oversee the responsibilities of an abolished CHA.

c) If responsibilities of CHA were dropped, disparate and disproportionate mistreatment of Latino community would continue in areas of education, housing, employment, and economic development.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 43.115.010, et al.

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☒ one ☐ two ☐ three ☐ four

## 16. Required Representation:

To the extent practicable, appointments to the commission shall be made to achieve a balanced representation based on the Hispanic population distribution within the state, geographic considerations, sex, age, and occupation.

17. Federal or other mandates:

N/A

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

N/A

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Antonio M. Ginatta, Executive Director

7/25/03

PO Box 40924

360-753-3159

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Washington State Historical Advisory Board

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Secretary of State

1976

15

3

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

7. Summary: Primary Responsibilities:  
Submit Grant proposals to HRPRC for federal funds.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

13) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

5,000

Archives & Records Management Account  
A

2003-2005 Biennium Estimate

10,000

Archives & Records Management Account  
A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Loss of Legal/Historical Records

b) No coordination with records schedules

c) Loss of important legal/historical records

10. Legal authorization: State Constitution Article, RCW, WAC or EO

EO

11. Legal Authorization is:

☐ Specific ☒ General

12. Appointing Authority: Secretary of State

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

16. Required Representation:

State Archivist and local historical associations

17. Federal or other mandates:

Required for federal funding

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

State Archivist only

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Jerry Handfield, State Archivist

09/04/03

1129 Washington St. SE, Olympia, 98504

360-586-2664

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## HIV Early Intervention Steering Committee

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Washington State Department of Health

1993

17

10

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

1) Assist DOH on HIV Early Intervention Program and AIDS Prescription Drug Program scope of benefits and covered services. 2) Represent interests of the programs to constituency groups. 3) Provide a forum for community and consumer input into program services and development.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

14) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$32,800

1) GF - State  
2) A

2003-2005 Biennium Estimate

\$32,800

1) GF - State  
2) A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) No avenue would exist to assure consumer and community input.

b) Communication with constituency groups would be limited.

c) Program would be less effective in implementing federally required "quality assurance" measures without committee.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

WAC 246-130-010

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Secretary, Department of Health

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☒ one ☐ two ☐ three ☐ four

### 16. Required Representation:

Washington State residents living with HIV, HIV medical experts, and community organizations.

### 17. Federal or other mandates:

HRSA requires community input for the AIDS Prescription Drug Program. This group meets that requirement.

### 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

### 19. Certification:

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Anne Stuyvesant

7/17/03

PO Box 47841, Olympia 98504-7841

(360) 236-3477

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## HIV Study Committee

Not Reported

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☐

Washington State Department of Health

2001

13

10

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

Review HIV prevention activities in Washington State to determine the following: 1) Are the goals of the prevention strategies under the AIDS Omnibus Act responsive to the current epidemic? 2) Are funding streams and levels for the AIDS Omnibus Act and other HIV/AIDS prevention funding responsive to the current epidemic? 3) Are the interactions and coordination of HIV/AIDS prevention programs with care services responsive to the current epidemic?

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

15) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$49,213

1) GF - State

2) A

2003-2005 Biennium Estimate

\$0

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) One time committee.

b) One time committee.

c) One time committee.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

None

11. Legal Authorization is:

☐ Specific ☐ General

12. Appointing Authority: Secretary, Department of Health

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

### 16. Required Representation:

Legislative, local public health, AIDSNET Council, Public Health-Seattle-King County, Governor's Advisory Council on HIV/AIDS, Community Based Organization (CBO), State Board of Health (SBOH).

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Jack Jourden, Director, IDRH

7/21/03

PO Box 47844, Olympia, WA 98504-7844

360-236-3466

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## HIV/AIDS Education Program Review Panel

1. Board/Commission Name (B/C)

Washington State Department of Health

2. Name B/C reported under in 2001 or Unchanged ☒

1986

10

1 meeting & 24 reviews  
done by email or  
correspondence

3. Agency to which B/C reports

4. Year B/C was  
established

5. Number of  
members

6. Number of meetings  
last biennium

### 7. Summary: Primary Responsibilities:

This panel is required to review all written materials, pictorials, audiovisuals, questionnaires or survey instruments, and proposed educational activities, to be used as part of the educational programs funded through this federal cooperative agreement. The panel considers the appropriateness of the messages and the language designed to communicate HIV/AIDS information to various target populations.

8. Estimated Operating Costs  
(Boards/Commissions Only)

Total  
Costs

Sources of Funds

16) Enter fund sources, e.g., G.F. State, State Building Code  
Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$3,000

1) Federal

2) A

2003-2005 Biennium Estimate

\$3,000

1) Federal

2) A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) The program review panel is required  
as a condition of receipt of federal HIV  
prevention funds.

b) The program review panel is required as a  
condition of receipt of federal HIV prevention  
funds.

c) The program review panel is required as a  
condition of receipt of federal HIV  
prevention funds.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

Required as a condition of federal funding.

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Manager, HIV Prevention & Education Services

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

### 16. Required Representation:

Not less than 5 members representing a reasonable cross-section of the general community. No single intended audience may predominate the composition except: (1) for reviewing materials for racial/ethnic minorities, the panel may be drawn predominantly from such populations, and (2) sensitivity of culture and language should be shown.

17. Federal or other mandates:

Required as a condition of federal funding.

18. Other existing organizations state, local or private, which  
could satisfy the mandates listed in number 17:  
None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

John F. Peppert, Manager - HIV Prevention &  
Education Services

07/18/03

P.O. Box 47840, Olympia, WA 98504

(360) 236-3427

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Home Care Quality Authority

New Board as of 2002

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☐

Same

2002

9

14

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

The HCQA's primary responsibilities include improving the quality of long-term in-home care services by developing regulations of higher standards, increasing accountability and improving access to such services through the development of a state-wide referral registry. In addition, the Authority is to encourage stability in the individual provider workforce through collective bargaining and by providing training opportunities.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

17) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$6,350

General Fund - State - A  
General Fund - Federal - A

2003-2005 Biennium Estimate

\$20,000

General Fund - State - A  
General Fund - Federal - A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) This Board was created by public initiative and legislative action. Therefore, state statutes would need to change in order to abolish the Board and responsibilities.

b) Same as in a).

c) Same as in a).

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 74.39A 220 - 300.

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

### 16. Required Representation:

The HCQA Board consists of nine (9) members. Five (5) members are current and/or former consumers of long-term in-home care services provided for functionally disabled persons. In addition, at least one of the members is a person with a developmental disability; one member is a representative of the Developmental Disabilities Planning Council; one member is a representative of the Governor's Committee on Disability Issues and Employment; one member represents the State Council on Aging; and one board member is a representative of the Washington State Association of Area Agencies on Aging.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Mindy Schaffner

7/23/03

640 Woodland Sq. Loop SE PO Box 40940 Olympia, Washington 98504

360-725-2635

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Homeless, State Advisory Council on

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Department of Community, Trade and Economic Development

1993

30

6

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

To make policy recommendations to the Governor on ways to respond to the needs of people who are homeless; to increase awareness of homeless issues; to provide the opportunity for a coordinated approach to ending homelessness; to promote the public will to end homelessness.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

18) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

10,230

GF State

2003-2005 Biennium Estimate

14,000

GF State

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Loss of expertise and or experience

b) Current organization of the Council maintains continuity and ensures the best possible attentions is provided to this very important program/issue.

c) Loss of diverse group to provide service, review and provide feedback on homeless issues.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

Executive Order 94-11

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☒ one ☐ two ☐ three ☐ four

### 16. Required Representation:

Private businesses, non-profit agencies serving homeless people, housing authorities, cities, counties, federal government, youth, person who is, or has been homeless, CTED, DSHS, ESD, DOH, GA, Veterans Affairs, Corrections, OFM, State Board of Community and Technical Colleges and OSPI.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Sung Yang,  
Assistant Director, Housing Division

7/22/03  
Date

Department of Community, Trade and Economic Development  
906 Columbia Street SW 98504-8350  
Address

360.725.4024  
Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Washington Hop Commission

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Department of Agriculture

1964

10

12

3. Agency to which B/C reports

Year B/C was  
established

Number of  
members

Number of meetings last  
biennium

### 7. Summary: Primary Responsibilities:

Collect assessments, develop and carry out advertising, market development, public relations, education and information programs; support research and related programs; carry out programs relating to quality standards and statistics.

8. Estimated Operating Costs  
(Boards/Commissions Only)

Total  
Costs

Sources of Funds  
Enter fund sources, e.g., G.F. State, State Building Code  
Account, etc.  
2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$450,895

Assessments on hops when sold  
N

2003-2005 Biennium Estimate

\$452,674

Assessments on hops when sold  
N

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Producer support and involvement  
would decline.

b) This is an agricultural program and should not  
be transferred.

c) Funding of research and marketing  
activities would decline affecting producer  
income, research efforts and the economic  
viability of the industry in Washington.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 15.65 and WAC 16-532

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: 9 elected by affected producers, 1 appointed by the  
Director of Agriculture

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☒ Yes ☐ No

15. Board/Commission member compensation class

☐ one ☒ two ☐ three ☐ four

### Required Representation:

9 grower members elected statewide

1 member appointed by the Director of Agriculture representing the Department and the public

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which  
could satisfy the mandates listed in number 17:

None

19. Certification:

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Ann E. George, Administrator

7/29/03

P.O. Box 1207 Moxee, WA 98936

(509) 453-4749

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Horse Racing Commission

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Same

1933

5

20

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

7. Summary: Primary Responsibilities:

1. Authorizes live race dates. 2. Approves satellite locations for parimutuel wagering. 3. Licenses and regulates live race meets, individuals involved in horse racing, satellite locations, and simulcast operations. 4. Collects and distributes revenue from parimutuel tax and license fees.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

20) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

120,833

Horse Racing Commission Account - A

2003-2005 Biennium Estimate

120,833

Horse Racing Commission Account - A

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Loss of credibility with stakeholders.

b) Gambling Comm. - Loss of credibility with stakeholders.

c) The integrity of racing would be jeopardized.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 67.16.012

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☒ Yes ☐ No

14. Does Board/Commission have subpoena powers?

☒ Yes ☐ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☒ four

16. Required Representation:

One commissioner shall be a breeder of race horses and shall be of at least one year's standing.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Robert M. Leichner

7/22/2003

6326 Martin Way, Ste 209, Olympia, WA 98516

360-459-6462

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Washington State Housing Finance Commission

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Same

1983

11

24

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

To issue tax-exempt bonds to finance affordable housing; to ensure compliance with low-income set-asides in the housing produced; to finance facilities owned by 501(c)(3) nonprofit organizations; to allocate Low-Income Housing Tax Credits.

### 8. Estimated Operating Costs (Boards/Commissions Only)

#### Total Costs

#### Sources of Funds

21) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$ 115,281

Housing Finance Commission Account  
N

2003-2005 Biennium Estimate

\$ 121,045

Housing Finance Commission Account  
N

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) Not possible due to constitutional restrictions

b) Not possible due to constitutional restrictions

c) 2,500 - 5,000 fewer affordable housing units produced annually; contracts would be violated

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 43.180

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: The Governor

13. Is Senate confirmation required?

☒ Yes ☐ No

14. Does Board/Commission have subpoena powers?

☐ Yes ☒ No

15. Board/Commission member compensation class

☐ one ☐ two ☒ three ☐ four

### 16. Required Representation:

State Treasurer; Director, CTED; 1 Representative of each of the following: Elected Local Gov't Official, Housing Consumer Interests, Labor Interests; Low-Income Persons; 4 "At Large" Positions; Additional considerations: Geographic distribution, related experience

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

N/A

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Kim Herman, Executive Director

9/5/03

1000 2<sup>nd</sup> Ave; Ste 2700; Seattle, WA 98104

206-464-7139

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Human Rights Commission

Unchanged

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Same

1949

5

25

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

The Commissioners set policy direction for the agency and vote to approve recommended investigative findings.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

22) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

56,627

GF State

2003-2005 Biennium Estimate

57,000

GF State

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) The Commissioners are private citizens who represent the people of Washington. Their duties cannot be performed by existing or additional agency staff.

b) No other agency has similar police power to protect the civil rights of all people of Washington State. There is no other logical agency to absorb the responsibilities of the Commission; its work is unique.

c) No other agency has the enforcement and education authority given to the Commission under RCW 49.60. The right of the people of Washington State to be free from discrimination would be adversely affected.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 49.60

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Governor

13. Is Senate confirmation required?

☒ Yes ☐ No

14. Does Board/Commission have subpoena powers?

☒ Yes ☐ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☒ four

### 16. Required Representation:

Governor appointments represent the diversity of the people of the state and represents the state geographically.

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

None

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

Tanya Calahan, Clerk of the Commission

7-24-03

P.O. Box 42490, Olympia, WA 98504-2490

360-753-4876

Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)

# 2003 Boards and Commissions Report

## Hydraulic Appeals Board

1. Board/Commission Name (B/C)

2. Name B/C reported under in 2001 or Unchanged ☒

Environmental Hearings Office

1986

3

7

3. Agency to which B/C reports

4. Year B/C was established

5. Number of members

6. Number of meetings last biennium

### 7. Summary: Primary Responsibilities:

The Hydraulics Appeals Board is an independent quasi-judicial tribunal which hears and decides appeals from decisions of the Department of Fish and Wildlife under RCW 75.20.103 and 75.20.160 in accordance with the Administrative Procedures Act.

8. Estimated Operating Costs (Boards/Commissions Only)

Total Costs

Sources of Funds

23) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.

2) "A" if appropriated or "N" if non-appropriated

2001-2003 Biennium Actual

\$16,630

A - State General Fund

2003-2005 Biennium Estimate

\$18,330

A - State General Fund

9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.

a) There would be no staff if the group were abolished.

b) The Department of Fish and Wildlife (with additional expert staff) could review their decisions. This would reduce objectivity because the regulator would hear appeals of its own enforcement activity.

c) Appeals would go to various superior courts resulting in added costs and delays. Uneven treatment of similar actions throughout the state would result due to unavailability of expertise of the hearings body.

10. Legal authorization: State Constitution Article, RCW, WAC or EO

RCW 77.55.170

11. Legal Authorization is:

☒ Specific ☐ General

12. Appointing Authority: Agency Director

13. Is Senate confirmation required?

☐ Yes ☒ No

14. Does Board/Commission have subpoena powers?

☒ Yes ☐ No

15. Board/Commission member compensation class

☐ one ☐ two ☐ three ☐ four

### 16. Required Representation:

Designee of the Department of Ecology

Designee of the Department of Agriculture

Designee of the Department of Fish and Wildlife

17. Federal or other mandates:

None

18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:

N/A

19. Certification: *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

William H. Lynch, Director

7/15/03

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Name and Title

Date

Address

Phone

(This person assumes responsibility for accurate transmittal of the above information.)